

Sign Out Edit View Format Reports Chat/Help

ICANotes  
Behavioral Health EHR

Chart Room Chart Face Back

<- prev next ->  
Show Notes in List

+ New Note

SOS  
610 N. Silver St  
Silver City, NM 88061  
  
575-956-6131  
575-956-6947  

Lopez, Henry

  
ID: 1000010738264 DOB: 8/20/1962  
Case Management Note (SOS)

Use Note Creation Time

Clear Time

Set Date/Time

7/30/2023  
1:08 PM

Presenting Problem:  
Henry continues to experience anxiety.  
Henry continues to experience mood swings.  
Symptoms of depression continue to be described.  
  
Recent History: Client has a history of chronic homelessness, unemployment, anxiety, depression, grief, hallucinations, substance, use, poverty.  
  
Social Support Changes:  
No changes in Henry's family or social support network have occurred.  
  
Intervention:  
Prompted client to help me set up the dayhab room. Assisted client with cleaning up the laundry room.  
  
Assessment  
Henry presents as flat, Henry presents as friendly, inattentive, minimally communicative, casually groomed, normal weight, and relaxed. He exhibits speech that is normal in rate, volume, and articulation and is coherent and spontaneous. Language skills are intact. Affect is appropriate, full range, and congruent with mood.  
  
Plan: Continue to accommodate client to the best of shelter abilities and continue to prompt client to continue participating in programming plans now being implemented by shelter staff.  
  
Diagnosis: Schizoaffective disorder, unspecified, F25.9 (ICD-10) (Active)  
Major depressive disorder, recurrent, unspecified, F33.9 (ICD-10) (Active)

Audit Log

Copy contents of the text only into: clipboard internal message  
Copy complete note into: clipboard internal message

Print

Print Preview

Go to WORK Areas

Please Note: Changes or edits made on this page will be lost if you return to the work areas and reassemble the note.

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spell check

find

(Please click in the field and scroll down to see full text of note.)

Capture Signature

#1 Signed By:

Capture Signature

#2 Signed By:

Capture Signature

#3 Signed By:

Calendar

Print Invoice

\$ Account

Make Referral

Create Clinical Summary

Create Discharge Summary

Go to Therapy Groups

Change Note Title

This Note was eSigned  
7/30/2023 1:09:23 PM

Electronically Sign and Lock this Note

Signed Copies:  
7/30/2023 1:09:23 PM Rya

1 of 1

7/30/23, 6:04 PM